2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008660

Entity Name: GRIFFIN FAMILY FOUNDATION INC.

FILED Apr 09, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9550 SCADLOCKE RD.

JACKSONVILLE, FL 32208 US

Current Mailing Address: New Mailing Address:

9550 SCADLOCKE RD.

JACKSONVILLE, FL 32208 US

FEI Number: 20-1595357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRIFFIN, LYLE B 9550 SCADLOCKE RD.

JACKSONVILLE, FL 32208 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete GRIFFIN, NAOMI R GRIFFIN, NAOMI G Name: Name: 9550 SCADLOCKE RD. Address: 9550 SCADLOCKE RD. Address:

City-St-Zip: JACKSONVILLE, FL 32208 US City-St-Zip: JACKSONVILLE, FL 32208 US

Title: () Delete Title: ВМ (X) Change () Addition GRIFFIN, LYLE B Name: GRIFFIN, LYLE B Name:

Address: 9550 SCADLOCKE RD. Address: 9550 SCADLOCKE RD. City-St-Zip: JACKSONVILLE, FL 32208 US City-St-Zip: JACKSONVILLE, FL 32208 US

Title: () Delete Title: BM (X) Change () Addition

GRIFFIN, HAL E GRIFFIN, HAL E Name: Name: 9550 SCADLOCKE RD. Address: Address: 9550 SCADLOCKE RD. City-St-Zip: JACKSONVILLE, FL 32208 US City-St-Zip: JACKSONVILLE, FL 32208 US

(X) Change () Addition Title: VΡ () Delete Title: ВМ

GRIFFIN, LILA R Name: GRIFFIN, LILA R Name: 9550 SCADLOCKE RD. 9550 SCADLOCKE RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 US City-St-Zip: JACKSONVILLE, FL 32208 US

Title: VΡ () Delete Title: (X) Change () Addition

MCNAIR, VALARIE MCNAIR, VALARIE G Name: Name: 9550 SCADLOCKE RD. 9550 SCADLOCKE RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 US City-St-Zip: JACKSONVILLE, FL 32208 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NAOMI G. GRIFFIN DIR. 04/09/2005